

THE
BOSTON MEDICAL AND SURGICAL JOURNAL.

VOL. XXXII.

WEDNESDAY, JUNE 18, 1845.

No. 20.

DR. ELLSWORTH ON THE MODUS OPERANDI OF MEDICINES.

[Concluded from page 377.]

RESPECTING the class of diseases termed Neuroses, there must necessarily be more doubt, as we are unable to bring the microscope to our aid in investigating the abnormal condition of the vital fluid; still, analogy and a few well-established facts are sufficient to incline us to the belief that the same law holds true also here. The neuroses, it is well known, are much more apt to be developed when the body is not in a vigorous condition. There has been considered to be a sort of antagonism between the vascular and nervous systems, since when the former is depressed the latter is in a highly sensitive condition. I believe it a *corresponding* state, and not an antagonizing one. It certainly demands tonics for its relief. We accomplish the cure by filling the vessels as soon as possible with rich blood, and temporarily by the exhibition of stimulants. In delirium tremens we make use of nervous stimuli; particularly of those which will act upon the brain. Alcohol, therefore, in tolerably free doses, is very efficient. Opium, also, guiac., ether, assafoetida, ammonia, are all useful. In epilepsy our practice has been in a measure empirical, unless we have been able to find the cause of the commotion in the system, and have been obliged to resort to remedies known to possess a tonic action upon the nerves. Nitrate of silver, ammoniated copper, electromagnetism, zinc, arsenic, are among the most efficient, and not sedatives as conium and prussic acid, which would be the case if there was excess of action. Apoplexy, though getting to be, is not yet generally well understood. To it I have directed close attention for some years, since it is a disease extremely common, carrying off annually many of the noblest of the land. I am convinced that it is strictly, in the majority of congestive cases, a disease accompanied with loss of tone in some tissue or portion of the brain, particularly of that generating the nervous fluid or influence. It is not inflammatory, for the amount of fibrine in the blood, as shown by Andral, is often below the normal quantity. It follows exhausting efforts, occurs among those whose vital powers are injured by age and excessive feeding, or more commonly among the broken down, poorly clothed and fed, as in our almshouses; among these latter it is much more unmanageable. It occurs oftenest during the oppressive heat of summer or the intense cold of winter, and frequently follows hearty meals, when the stomach is called upon to perform unusual work. It may be asked, why do we bleed? It is not because this remedy is di-

rectly curative, excepting in cases depending upon hypertrophy of the heart or obstruction from some mechanical cause. It may be omitted in many cases without the danger apprehended, and among the poor and debilitated is generally injurious. Yet it frequently is of service, just as inflammation by removing the congestion, while specific stimuli complete the cure. One of our most efficient agents in the treatment of this disease is croton oil. It has specific powers. Apoplexy has frequently, perhaps almost always, its exciting cause in the deranged action of some of the abdominal viscera or their governing nerves. Some debilitating cause acting there, involves the brain secondarily. The powerful stimulus of the oil acts frequently in a most prompt and satisfactory manner, even before the bowels are affected by it. Here is an instance. A woman, who had at various times been deranged, and always of feeble intellect, was seized with a slow fever, strongly resembling some of the obscure inflammations of the brain. Her brother, a very intelligent man, suspected this to be the case. It appeared to me, the difficulty primarily lay in the deranged state of the abdominal viscera. I saw her only at considerable intervals, and by a neglect of her nurse the bowels were not properly attended to. Early one morning, information was brought me that she had a fit. She was lying in a complete apoplexy, with stertorous breathing. Of course, as this state had supervened on a long febrile condition, it seemed to me a hopeless case. However, three drops of croton oil were placed on the tongue. In a few minutes it operated as an emetic, and she ejected fecal matter by the mouth. Her apoplexy vanished at once, and she was soon convalescent.

I have seen all the symptoms of apoplexy supervene immediately after fainting, lasting but an instant. Such a case occurred to me only a few days since, while examining a maniacal patient. The pulse was full and hard, seeming to indicate the lancet. While preparing to swallow a purgative portion, he fainted; he was laid on the floor, stertorous breathing followed for a moment, when he leaped up and took his medicine without hesitation. The same thing I witnessed in a lad whom I was vaccinating lately. His fainting was followed by an instantaneous apoplexy, and this by consciousness. Three years since I was called to see a middle-aged woman with apoplexy. There was sufficient fulness and hardness of pulse to justify bleeding, nor was she feeble and broken down. A few ounces were taken, but the symptoms seemed to become rather worse. She rapidly recovered under the use of ammonia, valerian and iron. She still remains hemiplegic, and, singular as it may seem, is unable to pronounce any syllable except *no*, which she uses with a nod when she means *yes*, and it is brought into requisition on all occasions. A precisely similar case has fallen under my observation since then, where that monosyllable was the only word which could be pronounced. Graves mentions a similar case in his clinical lectures.

A plethoric, short-necked gentleman, weighing at least 250 pounds, who had long been looked upon as a candidate for apoplexy by every one, was seized with a fit six years ago. I found him lying in his hall upon the floor, in a completely comatose state. Cold water was freely

applied to the head in a stream, and as his pulse was extremely full and strong, a vein was opened in each arm. Soon he revived and recognized his friends. In about half an hour slight twitching of the muscles of the face could be seen, a violent convulsion ensued, followed by stertor and complete apoplexy. Two years after he had another attack, and was freely bled; during the course of the ensuing twenty-four hours he had fourteen different convulsive attacks, each followed by apoplexy. Croton oil was of service, but what was especially useful was the oil of valerian, which speedily restored him after the first dose. His bladder was, however, paralyzed for a week. A year after he had another attack, and though his pulse was full and strong, yet, knowing how quick it felt the previous bleedings, I was deterred from its repetition, and as he could not swallow, administered an injection of brandy. He was soon enabled to take the valerian by mouth, and made a speedy recovery. Whenever threatened with an attack, which is announced by a feverish state of the system, and dulness of mind, valerian and zinc quickly restore the bounding pulse to its natural standard. When last year absent from the city, with his wife, he had an attack, and it was with the greatest difficulty she could prevail upon the medical attendant to delay the use of the lancet until the remedies he had been accustomed to, might be tried; he made a happy recovery, and continues well to this day.

For several years past I have been much less in the habit of bleeding extensively after the development of an attack, but resort earlier to, and rely more upon, remedies calculated to stimulate the bowels and excite the action of the brain, and can say, with most satisfactory results, compared with the strict antiphlogistic treatment recommended by the earlier writers of this century.

Inflammatory rheumatism partakes of the character of a neurosis and inflammation. The treatment generally adopted is to diminish the amount of blood by venesection, the fibrine by calomel, and then perhaps colchicum alone, or with the other agents, or antimony. But other remedies may be used at an early period, particularly if the attack is light, such as mezereon, guaiac. and bark, whose operation is upon the nervous or vascular tissue as specific stimuli. In the latter stage of the disease tonics are universally allowed to be the remedy.

In many of the neuroses, accompanied by a poor state of the blood, iron restores its vigor, and this indirectly stimulates the nervous structure by a free supply of oxygen to the whole body. It is, therefore, a remedy in all sorts of neuroses, just as mercury is in all the phlegmasiæ. It is not strictly specific in its action. Colchicum seems to possess the property of constricting the capillaries of the fibrous tissues, and particularly the glandular structure of the kidneys, or that portion which presides over the elimination of uric acid, and it is to this double property it probably owes its usefulness in rheumatism. Turpentine is somewhat similar in its action; it is also an excellent general stimulant, particularly in low fevers, where there is ulceration of the bowels; in larger doses it much resembles alcohol. In chorea, where there is a disordered state of the bowels, it is frequently superior to iron,

and is highly recommended by Dr. Hunt, of Sir Patrick Dunn's Hospital, Dublin. It is one of the best remedies in lumbago, whether taken internally or applied externally; in this latter manner it sometimes removes the pain in a few minutes.

The treatment of tetanus has been greatly diversified, but it seems to me that the opinion is gaining ground that it requires a treatment of tonic character, and I am confident that when we can find for it a specific tonic, then we shall have satisfaction in its treatment. This disease occurs mostly in individuals whose nervous systems are in a peculiarly irritable state, and predisposed to be thrown into confusion by a proper exciting cause. This state, like that of the nervous irritability following sickness and exhaustion, is best removed by tonics, such as iron. Hossack found wine, in large quantities, useful.

There is some specific stimulant property in the iod. potass. not generally recognized. It is of known efficacy in hysteria, and from its remarkable and truly specific action in two cases of traumatic hysteria under my care, one of which could be distinguished from tetanus only by its early symptoms, I am led to hope it may be found useful in the more severe form of the malady. It is a well-marked stimulant to the periosteum, to cartilages, and in certain cutaneous diseases. Its anti-asthmatic power is probably owing to its peculiar action upon the mucous membrane of the lungs or the pneumogastric nerve. A medical gentleman, living in a district where the disease is endemic and extremely common, says most cases yield to this remedy, but he sometimes finds the nitrate of silver necessary. The action of these two agents must, then, be somewhat alike. I once had a young woman under my care for spasmodic asthma; her attacks were extremely severe, and painful to witness. Gin gave more speedy relief than any medicine. Electro-magnetism will relieve asthma frequently when the attacks are purely spasmodic. Hysteria, in all its forms, requires, sooner or later, a tonic or stimulant course. Valerian, one of these remedies, seems to be principally confined in its operation to the part of the brain or spinal column generating the nervous fluid, and it is most singularly efficacious in stopping almost all varieties of convulsion, both in adults and infants. The oil is the best preparation for this purpose, and I have rarely seen it fail; though I have not used it in cases requiring the lancet or antimony, until these had been tried. In the Retrospect, Part X., mustard is advised in cases of infantile convulsion, and from the nature of its oil I think it must be useful, and on the principle here laid down.

Before remarking upon narcotics, or medicines so classed, I wish to say a few words respecting pain, which is intimately connected with their operation. What this may be, it is impossible to say, except that it is the fulfilment of a function; it is an action, altered from the state of perfect health. Perhaps it is impossible to state wherein consists the difference between a pleasurable and painful sensation. Pain has ever been connected, in the minds of men, with inflammation, and of course, according to their theoretic view of this, with an exalted action of the nervous fibrils; but the theory of inflammation being overthrown, as it completely

is, the same will perhaps be found true respecting the nervous system when transmitting the sensation of pain. Several of the medical men of Great Britain seem to entertain this view, and to me it appears quite rational. If a person receive a severe bruise upon the foot or hand, for a moment no sensation is perceived, the parts being paralyzed; this is followed by increasing pain for a short time, and this gives place to returning ease, as vigor is restored. Have we a right to say that these nerves, bruised, and in a state badly to fulfil their duties, are acting with uncommon force? or is a nerve compressed under the nail, as when wounded by a sliver, more free to transmit sensation than when un hurt? It appears to me that it would be much more reasonable to suppose there was a state of action corresponding to the disordered state of the transmitting organ. We cannot call this paralysis; this is a distinct state; but may it not be a peculiar debility, depending upon the peculiar organization of the sensor portion of the nervous tissue, in other words a specific debility? The power of transmitting the sensation of pain is a specific endowment, possessed only by certain nerves, and not even shared by the brain; it is developed only when some portion of the system is reduced below its healthy state. Consequently a condition of weakness or disease is always attended with pain, which is excited by the most trivial causes, such as would make not the least impression on a well man. If this is true, perhaps we shall find pleasurable sensations depend upon an *exalted* action of these nerves. All organs acting in a perfect manner, the secretions taking place in a normal way, give a feeling of glow and vigor, which is really a pleasurable sensation. It may be asked, then, why do stimulant applications to an inflamed surface cure the inflammation, if it produces this peculiar condition of the sensor fibres? I answer, that the stimulant does not act as an astringent on the capillaries for some time, for they are enlarged at first, during the excessive smarting of the remedy, and relief does not ensue until the pain has begun to subside, which takes place as the vessels contract under the influence of the organic nerves. The pain is produced, as it were, by a surprise of the nerves, before they are re-inforced from the fountain of their power, the brain. Moreover, this tonic action upon the vessels is specifically distinct from the irritation, though it is true most tonics are at first irritant, but all irritants are not tonics, as antimony applied to the conjunctiva when inflamed. Often, however, we see ulcers of the cornea and other parts of the body, painful upon the application of the most emollient substances, as poultices, lead, solution of opium, relieved at once by the lunar caustic. This can hardly be owing to a crust formed, for there is no evidence of this, and no crust or varnish would produce so sudden relief; nor is it due simply to the contraction of capillaries, for these are at first rather more congested, or certainly seem to be quite as full of blood. The phenomenon is quite as well accounted for by supposing a specific stimulus given to the diseased structure, exactly adapted to its depressed state, and bringing it up to a healthy condition.

Why, it may be asked, do poultices allay pain? Poultices are most useful in the earlier stage of inflammation, before the diseased capillaries

have fully yielded to the exhausting causes. At this time, a powerful stimulus could not be used, both from danger of exciting the heart, and increasing the pain by irritation. Over-stimulation is to be guarded against, since it would only increase the difficulty. To meet this crisis, nothing surpasses the poultice, which by the gentle stimulus of heat gives the exact tone required, arouses the glandular structure of the skin, which is favored in its action by the softening effect of moisture and the increased flow of blood to the surface. It gives the specific degree of excitement to the irritated sensor nerves, adapted to their present circumstances, for a remedy may have a specific action both as respects its nature and also as respects its degree; one agent giving a greater degree than another, yet both agreeing in character. Blisters are stimulant, and by this property, cure a scald head, an erysipelas, or a bubo; flying blisters are highly useful in the latter stages of typhus fever. When applied to a surface, as the thorax, on the decline of pleurisy, they over-stimulate the skin, producing inflammation—but the internal parts only to the right degree; thus the inflammation seems to change situations. If resorted to, too early, there is a stimulus of the heart which is injurious, and there is a great generation of fibrine in the blood. Applied to an extremity, they are sometimes more powerfully excitant, than when near the part; this takes place through the agency of the nervous system, just as applying the hands to the fire when suffering with cold sends a glow over the whole body, or dipping them in water refreshes the whole system when suffering with the heat of summer. This applies especially to nervous diseases, for in the inflammatory I have ever found them more useful applied near the part, unless so near as to over-stimulate.

The following is a case illustrative both of the effects of specific tonics in inflammation, and the danger of over-stimulation by blistering. A woman, of feeble constitution, injured her eye by lime. She neglected it for several days, and intense inflammation of the whole globe had set in. It was relieved by the usual antiphlogistic treatment, including mercury. Just as it was passing off, I directed a blister to be put behind the ear; she put it on the temple, close to the eye. The inflammation was re-kindled with double fury, the cornea became infiltrated with pus, all sight was lost, and there seemed not the slightest hope of saving the eye, the loss of which would have been deplorable, as she had lost the other in early life from smallpox. In despair, I gave her bark. Its effects were wonderful; in a fortnight she could sew, and had fully recovered from the injury. A few leucomatous spots were all that remained.

There may be other unknown operations of this powerful agent, but the above seem to me satisfactory. It relieves the deep-seated pain by curing the disease from which it originates. When an inflammation is advanced, we do not find poultices longer soothing, but cold is both more pleasant and curative by its diminishing the chemical actions on which depend the phenomena of inflammation, and by its constringing the distended capillaries. When, however, cold is too long continued, it becomes sedative, for the over-stimulated parts yield, and an opposite state ensues, and moreover the chemical actions are delayed on which depend the vitality of the part.

If the above remarks be true respecting the phenomena of pain, we have a clear explanation of the operation of narcotics, each being stimulant to the nervous structure of some one or more of the tissues.

Strychnine is known as an irritant to the brain and motor column of the spinal marrow, but it also seems to act upon that part secreting or governing the nervous fluid, as it has a tendency to increase the quantity of blood in the brain, just as turpentine or squills increase it in the kidney. *Nux vomica* produces this effect more strongly than strychnine. It is to be avoided, therefore, in cases of inflammation of this organ, just as diuretics in kidney disease. When, however, it is used at a time when this congestion is not present, and the fluid is generated or acts with less than common activity, it is valuable. It is a stimulant and irritant to the spinal cord. I have just found it very useful in a case of great agitation of the muscular system, from irregular nervous supply. It has been found advantageous in certain diseased states of the stomach, arising from loss of functional power. As a stimulus to nerves of sensation, it is of little use; not having any specific relation to their functions, it has generally, in these cases, proved quite inefficient.

Ergot is a powerful excitant of the motor tract of the lower portion of the spinal marrow, rousing into activity the organs deriving their nerves from this region, particularly those of the uterus and bladder. It is true that in a single case, it is said to have produced, in a large dose, a paralysis of the lower portion of the body of a dog, but this effect followed over-stimulation, which produces exhaustion. It is this stimulant property of ergot which we seek for, while we neglect its sedative effect upon the heart and brain.

Veratria, now beginning to be used, is proving itself an energetic, special stimulant, acting more particularly upon the sensor tract. This effect follows, however it may be administered.

Aloes acts as an emmenagogue by stimulating the parts concerned to assume their proper function, and yet cures menorrhagia by stimulating the dilated and weakened capillaries. Dewees, p. 153 of his work on diseases of women, mentions a case, where he was astonished at the success of *hiera picra* in this disease, for the case had given him great trouble. He found it useful after this in other instances, and the cure was wrought, on the principle here laid down, of specific stimuli. The same thing results from the use of ergot, savine, and capsicum, not because they can produce menorrhagia, but because they restore the tone and vigor of the diseased and weakened vessels. When desirous of curing a dropsy, if it arises from want of secretion in the kidney, we give the stimulants specifically acting upon this part, premising, however, venesection and calomel if inflammation be present, then digitalis, squills, *lyttæ*, juniper, hyd. potass., all possessing this peculiar power. If we prefer to evacuate the fluid by the alimentary canal, we give jalap, elaterium, tart. potass., &c., which stimulate the glands of this region. In jaundice, if not of an inflammatory character or depending on obstruction of the ducts, medicines which stimulate the apparatus for the secretion of bile are administered. In many cases of colic, Hull's pills, a compound of various spices and a

stimulant purgative adapted to the tissue particularly involved, have justly obtained considerable celebrity. The instances cited are sufficient to illustrate my view ; let the whole range of diseases be run through, and I am confident it will only strengthen the argument, and show the correctness of the general rule.

The only difficulty I have found has been with some of that class of remedies acting through the nervous system, and whose operations cannot be strictly watched ; this lies, however, not in anything militating against the theory, but from the difficulty of proving the position. I believe, however, that all of them owe their curative powers to some specific property of stimulation, and that their sedative power, if they possess any, is rarely, and then only indirectly, sought for by the physician. Digitalis, for instance, acts mechanically, as it were, upon the circulation, compelling rest in its central organ, and yet digitalis has been much overrated as a curative agent on this organ, and is less used than formerly. Let us take conium : its operation on the spinal marrow is of a sedative character ; it produces convulsions, followed by paralysis, without sensibly affecting the sensor tract. Upon the glandular structure of the liver it is excitant, being one of our most energetic chologogues ; none of its effects can be depended upon better than this. Now, on Hahnemann's principle, it ought to cure paralysis, as it causes it, but it is quite useless. On ordinary principles it should cure convulsions, as it causes paralysis ; but it will not, and the reason is that it is not specifically stimulant to the cord. In this disease, however, we do find benefit from valerian, zinc, iron and ergot, which are tonics to this part.

Opium has a specific stimulant property in reference to the nerves of sensation, particularly to that function brought into exercise in the transmission of pain. It is known to be, in small doses, stimulant, producing the effects of spirit or wine. The Turks make use of it to stimulate the genital organs, thinking it increases voluptuous sensations. When it is taken in excess, a state of insensibility is produced ; but we have no right to call this unknown state one of sedation, unless we can show that the similar one brought on by alcohol is of that character ; yet the operation of brandy is very similar to that of opium in allaying pain, but we have no hesitation in calling brandy stimulant, as it excites the heart. All we can say is, that in heavy doses it puts the brain in such a relation to the mind that the latter cannot act upon the former.

Illustrative of the effect of spirit in preventing pain, is the following case. Having occasion to remove nearly all the lower lip for a cancerous disease from an intemperate man, I found him well prepared for the operation, having fortified himself with an extra glass or two. No marble could have been more passive during the incisions ; not a muscle moved, nor did a sigh escape him. Yet he was not intoxicated, but his nervous system was too much excited to feel as keenly as when in perfect sobriety. He only wondered that, as it hurt so little, he had never had it done before. The nitrous oxide gas has been used in quite a number of cases by our dentists, during the extraction of teeth, and has been found, by its excitement, perfectly to destroy pain. The pa-

tients appear very merry during the operation, and no unpleasant effects follow.

But even if opium in these large doses is sedative, I answer that it does not militate against this theory, since we do not use the doses producing narcotism, to cure, but may sometimes to produce temporary relief. It may be replied, that narcotism does sometimes cure, as in cases of delirium tremens. It is not narcotism which does it; that follows the decline of the disease. But delirium tremens is certainly attended with debility, and a sedative will not cure it; therefore opium is not a sedative. It stimulates the irritated nervous system, bringing it nearer to a state of health. Hyoscyamus is a sedative to the brain and nervous system in part, particularly the motor; hence in large doses it will produce delirium tremens, but being a sedative it will not cure the disease, in spite of the doctrine of Hahnemann. When in this malady opium produces sleep, it prevents the waste of the vital powers, allowing an accumulation of it in the system. The enormous doses of this drug formerly given, are not nearly as efficacious as smaller ones combined with the free use of spirits or ammonia, a practice pursued in the Blockley Hospital at Philadelphia, and which in my hands has been very successful. This practice sooner brings the system up to the standard of health, leading to quiet and refreshing sleep. No medicine is so stimulant to the specific function of the sensor nerves, and none equals it as a tranquillizer of pain. Camphor exhilarates the mind, and in large doses excites the pulse. It is as a stimulant that it proves so useful in subsultus tendinum, resulting from the exhaustion of fever. It stupefies like opium, and may thus quiet pain, but its specific effect on the sensor nerves is less marked, for it has less relation to this system. Camphor will relieve strangury, and is commonly resorted to for this purpose; yet in an over dose it has occasionally produced the same thing, and I have seen the same in a marked degree from an over dose of morphine. Camphor relieves this state, not by producing a similar disease, but by its stimulating the mucous membrane, and particularly the nerves of sensation, in this way proving vastly superior to turpentine and lyttæ, both of which are much more likely to cause a strangury, but have no power at all of relieving it in any dose. In bilious colic its combination with ether, will, just as Hull's pills and for the same reason, prove very useful. It is by no means improbable that the narcotic drugs operate upon the nervous system just as stimulants upon the vascular. Dr. Billing and Dr. Young hold opinions somewhat similar, though I was not aware of the fact until after writing the above.

There is no phenomenon more difficult to be accounted for, than that of convulsions. In itself it appears to indicate neither excess nor diminution of nervous energy; it seems, however, to result from an irritability, which is best treated by invigorating remedies. It may arise from the loss of some principle of vitality in the spinal cord, which allows the nervous energy generated in or emanating from the brain, to act with unwonted force. Muller says, page 661, "It appears necessary to direct attention to the fact, that any sudden change in the condition of the

nerves of muscles, by whatever cause it be produced, is productive of a shock to the muscles. The closing or interruption of the galvanic circle, sudden destruction of the nervous tissue, burning, chemical influence, mechanical stretching, and all such influences, appear to give an impulse to the imponderable principle of the nerves, by which either a current or oscillation of that principle towards the muscle is excited, whether the external influence heighten or depress the vital energy of the nerves themselves. Hence muscular contractions may attend any, even the most feeble state of the vital forces, the nervous principle being capable of such motion or oscillation, as excites the muscles to action, when any change is produced in the state of the nerves, even though the activity of the nervous principle is upon the point of being annihilated. We have here the opportunity of verifying the law laid down in the *Prolegomena*, that excitation is perfectly different from augmentation of the vital forces, that an animal system may be stimulated to death, and that even the narcotic substances (*the alterantia nervina*) which have the property of producing so great a change in the nervous matter, may give rise to symptoms of irritation or excitation, while they destroy the vital property of the nerves." We have a constant tremor and convulsive state in a muscle cut across. This energy of the muscle is derived directly from the blood, and the obstruction of its supply produces paralysis; the nerves take to this, messages from the brain, and it responds to any communication. Animals bled to death, die convulsed, and this action is continued after death. I had prepared more on this subject, but finding this opinion of Muller so apropos to the purpose, I have quoted it, merely adding that my opinion is strengthened by his view, and I will leave the matter resting on his authority.

We can now hardly attribute this state of things to undue generation of nervous power, but rather everything tends to show a depressed state of this system of nerves. I think, then, we may class strychnine as an irritant of the motor tract of the cord, or the motor centre of the brain, and it is for this reason that its effects are especially felt upon the diseased side in paraplegia, a phenomenon which has created much speculation, since a part in a weakened state more quickly feels an irritant than one that is well and endued with the powers of resistance. In tetanus the muscles are freely supplied with blood, allowing them to draw from the fountain all that is necessary for their contractility; the diseased motor tract indicates great irritability, and the slightest external causes are sufficient to excite perturbation throughout the system of the former. Is not this irritability leading to convulsive action, in a motor nerve, the same condition of that nerve as pain of a sensor? If to this latter an irritant be applied, pain is produced; if to the optic the same irritant be applied, we have the sensation of light; if to a nerve of motion, spasm results. It not unfrequently happens that in puerperal convulsions, the woman feels, as it were, a metastasis of pain from the uterus to the head, and this is instantly followed by spasms. Severe pain, it is well known, frequently induces convulsions. This view is borne out by the results of practice. Many of the nervines calculated to relieve pain, are

also useful in the removal of convulsions. Valerian cures both hysteric pains and spasms; opium and camphor do the same. This state of the motor and sensor nerves I have endeavored to show is relieved by stimuli adapted to their especial organization, and if I have failed, I believe it is not owing to want of truth on my side, but to the difficulty of obtaining full proof of the operation of medicines on the nervous system. Though there may be some obscurity around some parts of this theory, I am confident it will dispel the crowd of difficulties attending every other. I hope the assistance of others will be rendered in developing this truth, if indeed it be one.

As respects two of the doctrines of Hahnemann, that diseases have their origin in syphilis and the itch, and that infinitesimal doses have an action on disease, I have nothing to do at present, but only with that of "*similia similibus curantur*," the Latin of which has made considerable impression on the public mind. According to the theory advanced by me, we shall find the disciples of Hahnemann frequently successful in the treatment of diseases, when they give sufficient doses of a medicine which in an over-dose would over-stimulate the organ or function, this perhaps producing a disease similar to the one desired to be relieved; but when they give a remedy in any dose which will be a direct sedative to a part, even if the remedy is capable of producing precisely such a disease, it will be a total failure. How few diseases are truly represented by the poisonous effects of remedies, or even distantly shadowed! What agent will produce scald head, onychia, mammary enlargements, malignant pustule, cataplexy, tonsillitis, whooping cough, gonorrhœa, gout, phlegmasia dolens, diabetes, and a host of other maladies, contagious and non-contagious? yet all these, with the exception of the last sometimes, yield easily and readily to their specific stimuli. There are, moreover, some diseases of a deadly character, whose symptoms are so closely imitated by medicines, as to lead to the belief that they must yield to Hahnemann's theory if correct, as tetanus and hydrophobia. Yet, alas, how vain is the hope! Tartarized antimony will produce inflammation of the stomach, if given in an over-dose, yet we know its powerlessness in small doses, and its bad effects in large. Foxglove is a sedative to the heart; would one rely upon it to revive a patient overwhelmed with a shock? Iron increases the red globules in the blood; will it cure a plethora? Will tannin, a powerful astringent, cause profuse hemorrhage? The system of Hahnemann has not triumphed over a single disease before his day not equally under the power of medicine, while there has been so much of error in the only principle worthy of attentive consideration, as to lead medicine, so far as it relates to him, a retrograde path.

Let it not be understood, that I advocate the general stimulant plan; far from it. I am fully aware of its dangers, and should be among the last to advocate its adoption. It has been my design to point out what I consider the seat of power in remedies, and that when we use them, it is their specific stimulant operation which is brought into action, and never, except incidentally, their sedative. Adopting this principle (and the more it is examined the more true it appears), there will be little difficulty

in presenting an effectual barrier against the armies of empiricism, while we shall have a sure guide in our therapeutic researches, and vastly more satisfaction in the treatment of disease.

PROGRESS OF VACCINATION IN SIAM.

[DR. BRADLEY, the writer of the following letter addressed to the Editor, is a missionary physician, in the service of the American Foreign Missionary Society, and has been stationed several years at Bangkok, the capital city of the Kingdom of Siam. After a series of well-conducted experiments, he came to the conclusion, some time since, that vaccination could not succeed in that climate during the rainy season. His observations on the subject were published in the Journal. It was regarded as a singular modification of the law of nature, so unerring in all other countries, that the absorbents refused to carry the virus into the system at certain periods, or, if introduced, no visible manifestations of it were discoverable. By the communication appended to this note, it will be seen that Dr. Bradley's theory has been put to a trial, and he has satisfactorily discovered that the law was not in fault, but the virus with which he experimented. The letter was received on Wednesday last.—Ed.]

DEAR SIR,—I feel peculiarly happy in acknowledging the receipt and success of a parcel of pine-enclosed vaccine virus from you, which was sent from Boston about the 1st of November, 1843, and reached me July 19th. It was lodged at Singapore some months, and finally came from thence by a vessel express, as if the Lord would have me put to a stronger test my theory, that vaccination could not probably be propagated in Siam during the wet seasons, and afford him an opportunity to answer most signally the prayers of his people here, for the blessing of vaccination in Siam. The parcel was in a package of papers in the go-downs of our agents at Singapore. They knew not that it was there, or that we wanted any such thing. But as it was a light box, they took it, with two others, and put it on board a little craft that was chartered to bear R. Hunter, Esq., to Bangkok. We had many other packages there, but the captain could take no others. It arrived in the very midst of our wet season. I had made so many experiments with a multitude of other parcels from almost every quarter of the world, with utter failure, and had found, by many trials, that it was exceedingly difficult, not to say impossible, to produce even the smallpox from a scab of the same, in this country, that it seemed a very hopeless work to experiment for vaccina again, and that, too, in the wet season, and with matter taken more than nine months before. When I first received the virus, I could hardly summon a heart to ask the natives to let me experiment upon them again, as I had so often raised and immediately blasted their hopes in this way since the year 1840 (when, it will be recollected, I had some success in vaccination for a period of fourteen or fifteen weeks). But this hopelessness did not continue long, as we had some little ones exposed to the terrible variola. I began my experiments from a few scabs on the 23d

of July, observing very carefully all your directions. I think I inserted the matter into seven or eight children, Americans and natives, by at least forty punctures. I anxiously waited for the result eight days, and then suffered great heart-sinking by finding no kind of pustules. I then re-vaccinated the most of these persons, with two children of a Chinaman, in whose family I had vaccinated successfully in 1840. The mother anxiously sought the blessing of vaccination, for she had proved it to be powerful. I cannot find language to express the joy I had, after six days from that time, in finding that one of her little girls had a small vaccine pustule on her arm. The child was the very last one I could have any hope from, for she was so unruly in vaccinating her that I could not do it at all to mind. I had no confidence it would take; while I had some hope that it might take in some one of the others. Thus hope and life sprung up where all was hopeless and dead. In this second experiment I did not dissolve the scab in milk, but used rain water instead of it. On the seventh day from the operation, I found the pustule progressing, answering my most sanguine hopes, and vaccinated my own child, another child of the missionaries, and five or six of the natives. I was delighted to find, after six days, that almost every one of these had taken the vaccina. With much effort I succeeded in gaining the confidence of the parents and guardians of another set of children, to vaccinate from these. The matter was less quick in the third crop than before, and less so in the fourth than in the third, so that I much feared it would run out. But by having many different sets of children on different days of every week, I have managed to keep the matter working until now. I have inserted the matter into about 350 persons, and find, on counting up my notes of those that I have seen after vaccination, that about one third of the whole have taken it. Had I not had several centres of influence at one and the same time, I should have lost the work before now. It is now going on better than a week or two ago. I strongly suspect that when the dry season begins, it will be propagated with much ease. The Rev. J. Goddard has volunteered to aid in carrying forward the work by vaccinating among the Chinese, and so, also, has the Rev. S. Johnson. I have just issued a treatise on vaccination, a copy of which I will send you as a curiosity. I hope it will do much to dispel the many prejudices of this people against vaccination. The season for the smallpox has not yet arrived. It is near at hand, when our work will be tested. Your Journal of Medicine and Surgery comes regularly to me, and I read it with much zest, and, I hope, profit. Accept of my most hearty thanks for your perseverance in sending the vaccine virus. How great is the good you have already done in this, I need not tell you, and it is destined to augment continually. I have just received another parcel of virus from you—it came to hand this day. I will keep it in case of future need. Do not fail to send it twice a year. Excuse my very great haste, for I am almost crushed with cares. Yours truly,

Bangkok, Sept. 14, 1844.

D. BRADLEY.

CASE OF RENAL DROPSY.

By S. C. Farrar, M.D., of Brandon, Mississippi.

JOHN, a slave of Mr. P., was attacked, some four or five months since, with œdema of the legs, for which his master gave him various diuretics; from the use of which, for a few weeks, the dropsical symptoms abated—but suddenly the œdema increased, and the body became anasarcaous. In this condition he was placed, three or four weeks before his death, under my care; tongue clean, appetite good, pulse full and somewhat irregular, but not intermittent; breathing laborious; skin dry and mottled on the breast by white lines and patches; thirst excessive; bowels disposed to constipation, secretion of urine small; is unable to sleep with his head low, complains of no pain either in the chest or loins.

Treatment, first day jalap and cream of tartar; then Eberle's compound powder: R. Sup. tart. potass., sulph. potass., each $\frac{3}{4}$ ss.; pulv. scill. maritim. 3 i. Mix, and give a teaspoonful three times a day.

This compound had the effect of increasing the flow of urine, and of ameliorating the dropsical symptoms, but the improvement was temporary; his respiration became more difficult, and pulse more irregular.

Let him take digitalis, squills and calomel combined, in the form of pills night and morning. No improvement from this prescription. About eight days previous to his death he complained for the first time of pain in the loins; head also affected with pain; pulse full and strong. I now suspected this to be a case of renal dropsy, and the patient was bled to twelve ounces with relief to the head. On the 12th of February, three days after the first bleeding, it was repeated, but with no perceptible advantage.

13th. Symptoms worse. 14th. Skin cold, and bedewed with perspiration; pulse small and intermittent; at 5 o'clock, P.M., he died.

Autopsy.—At the *post-mortem* examination held at 9 o'clock the next day, the following appearances were noted. Pericardium distended with water; hypertrophy of the right ventricle of the heart, without any apparent obstacle to the exit of blood; left kidney enlarged, weighing 13 oz. (avoirdupois), mottled; also numerous linear depressions; right kidney enlarged, weighing $13\frac{1}{2}$ oz., mottled, and stained; the lower part, of a dark color, yet bloodless; the cortical substance presenting, when cut into, a pale homogeneous surface, with the exception of the dark space on the lower part of the right kidney. These kidneys were weighed in the presence of Mr. Wm. Reber, a student of medicine, who assisted me in the *post-mortem* examination. They were also examined by R. G. King, M.D., who concurs with me in opinion that this was a well-marked case of albuminia. Since 1837 (the year that Dr. Bright first called the attention of the medical world to this singular and formidable disease), Rayer, Christison and others have described granular degeneration of the kidneys, and M. Rayer has related instances in which the kidneys weighed 12 oz.; but, so far as I am informed, this is the most remarkable case of hypertrophied kidney on record. My object in reporting this case is to present additional evidence of the in-

sidious progress of Dr. Bright's kidney disease. From the size and altered condition of the kidneys, it is manifest that disease must have been going on in them for some time, although no indication of lesion was furnished by pain, until a few days previous to the patient's death. So obtuse is the sensibility of the kidney, that incurable lesions may occur in it before we are apprised of the disease, by pain—and hence pain cannot be regarded as one of the pathognomonic symptoms of albuminaria.

Frequent examinations of the urine in reference to its specific gravity and the quantity of albumen, will perhaps furnish the physician with the best and strongest evidence of renal dropsy; the urine of this patient was not examined, because the disease had progressed almost to its fatal period before renal dropsy was suspected.—*New Orleans Med. Jour.*

THE BOSTON MEDICAL AND SURGICAL JOURNAL.

BOSTON, JUNE 18, 1845.

Diagrams of the Fatal Circulation.—Beautifully-colored copies of Saint Ange's illustrations of the fetal circulation of the blood, accompanied, on the same sheet, with plans of the circulation in the four classes of vertebral animals, have been published by Hotchkiss & Co., Court street, Boston. Mr. Childs, the artist, never, probably, succeeded better in any lithographic undertaking. The principal merit in these drawings consists in conveying an exact representation of the actual appearance of the arteries and veins, from the heart to the placenta. A student at once embraces the whole mechanical arrangement of the vessels in the fetus, by this chart, which he could not so well understand by hours of study over the most lucid anatomical text book. The enterprise is deserving the attention and patronage of gentlemen who have students.

Missouri Medical Journal.—St. Louis is fast becoming one of the great medical centres, if the multiplication of means for enlarging the boundaries of medical science is to be accounted an indication. There have for some time been two medical schools there, and now there are two medical journals, and in the march of things, there may be more of both before the close of the year. St. Louis is a charming city, and is distinguished for the enterprise of its citizens. The profession of medicine embraces in its ranks, in that place, men of high attainments, whose ambition, like their skill, knows no limits within the compass of human efforts. The whole West is their ground—and if they cultivate the mass of medical intellect that is yet to be employed in that vast region stretching towards the Rocky Mountains, human health and happiness will be increased.

R. F. Stevens, M.D., commenced, on the first of May, the Missouri Medical and Surgical Journal, which is to appear monthly. It is folded and stitched in octavo, twenty-four pages, with a cover, at two dollars a year, in advance. The specimen No. contains several papers that will be

read with satisfaction, coming as they do from respectable sources. One of the papers, "*On the Mode of Operation and Therapeutical Application of Iodine and its Preparations*," by Thomas Barbour, M.D., deserves the special examination of practitioners. We know of but one essay extant, that imparts more satisfactory information on the subject, and that is a prize essay, that appeared at Edinburgh a few years since. Wishing Dr. Stevens a prosperous editorial career, we tender our good will. May subscribers increase and abound like prairie flowers.

Book of Prudential Revelations.—But little more than an acknowledgment of the reception of a copy of Dr. De Fontaine's *Golden Bible of Nature*, was made in last week's Journal. Opportunity has since been given of carrying our investigations further into the sinuosities and labyrinthine windings of the work. If patents were ever granted to book-makers, on the score of originality, this author's claim would not be disputed. In the honesty of undisguised vanity, the writer speaks of himself more flatteringly than he will be spoken of by posterity. Perched on the summit of an unique monument of his own fabrication, Dr. De Fontaine looks down upon the moving world beneath, with a complacency only felt by men constituted like himself.

The title of the work is, "*The Book of Prudential Revelations, or the Golden Bible of Nature and Reason, and the Confidential Doctor at Home, expounding to the Family Circle the Laws of Human Nature and Health, and the Doctrine, Origin and Progression of Diseases, and their effectual philanthropic Remedies.*" It contains 506 pages, and is divided into three parts. The execution of the printing is admirable, and in its finish, the work exceeds a majority of those that claim distinction on account of mechanical beauty.

In approaching the commencement of Part I., we stumble upon a laudatory poem, "*supposed to have been written by Dr. Percival*," who, we presume, is understood to be the celebrated poet and geologist, of New Haven, which starts off in the dignity of heroic verse, thus—

"Beware of doctors—stealthily who tread,
Like gloomy spectres round the sick man's bed;
With dangerous drugs, deceptive, quiet keep,
And cure their patients with eternal sleep."

This part contains a vast amount of physiological truth, but related in a manner to do more harm than good. A degree of inexcusable voluptuousness pervades a portion of the text, which a teacher of physiology has no right to manifest; as we contend that a physician is bound to clothe his advice in language as chaste as that of the moralist. Dr. De Fontaine is not an ignorant man, by any means; those who may accuse him of being so, will absolutely wrong him. Like a great ship, he is freighted with all conceivable articles, yet standing out to sea without a rudder, compass or commander. He abounds in curious and important facts, occasionally presented in brilliant language, yet they are so mixed up and conglomerated with non-essentials, as to be singularly obscure. Thinking men will not trouble themselves to dig for gold in the De Fontaine mine, when ready coin is at hand of a finer caret.

Part II. does not require especial notice. Its anatomical details are doctrinal, and in conformity to the teachings of anatomists. Indeed,

some of the descriptions are admirable, both on account of the description of individual organs, and of the physiology of their functions.

Part III., on which the erratic author appears to have concentrated all his force, is an anomaly in literature. "Hold up your heads," cried the sergeant at drill, and so say we to the purchaser of the Golden Bible. Was vanity ever distilled? Either Dr. De Fontaine is insane in regard to the subject of his own claims upon intelligent society, or else all the rest of christendom is mad as a March hare. This perpetual glorification of one's self may be a very pleasant employment to a writer, and yet be positively sickening to people entertaining common-sense notions of propriety.

Lastly—who will buy the *Book of Prudential Revelations*? Not physicians; since it would add nothing to their stock of knowledge. Those whining, feeble, medicine-taking persons, who are always trying the *new doctor*, and taking all the quack medicines on sale at country post-offices, will revel in the profound mysteries unfolded to them in this prodigious bibliographical undertaking.—Modest men may well exclaim, is this an age of bronze!

Principles and Illustrations of Pathological Anatomy.—A copy of Messrs. Desilver & Burr's edition of Dr. Hope, edited by Dr. Lawson, was brought to us through Mr. Mussey's book-store, Cornhill, towards the close of last week. The plates are in the highest degree creditable to the artists of Cincinnati. They could hardly be excelled in any other city of the Union. We must have sufficient leisure to admire such a series of pictures as characterize this elegant volume, before committing our impressions to paper.

American Edition of Copland's Dictionary.—From appearances, this great work, under the revision of Dr. Lee, will receive such patronage as the Harpers are in the habit of commanding when they bring out a useful book. The Nos. 3, 4 and 6 we have not yet seen; but from the good workmanship of those which have reached our table, we have undiminished confidence in the character of the publication, and in Dr. Lee's ability to adapt it to the wants of the whole body of American physicians.

Pennsylvania Hospital.—We learn, from the Annual Report of this Hospital, that the number of patients remaining on the 4th of April, 1844, was 89; admitted within the last year, 955, total 1044. Of these, there were discharged, 956; remaining April 4th, 1845, 88. The average number of patients maintained in the Hospital during the past year has been 102, of whom 21 were pay and 81 poor patients. Of the poor patients admitted in this year, 326 were persons who had sustained accidental injury requiring surgical aid. Of this description were also 20 of the cases remaining in the Hospital at the close of the preceding year. Total number of accidents treated during the year, 346.

The total number of patients admitted into the Hospital from its establishment in 1752, to 4th month 26th, 1845, has been 41,988, of whom 23,283 have been poor people, maintained and treated at the expense of

the institution. From 2d month 11th, 1752, when the first patient was received, to 4th month 26th, 1845, there have been cured, 26,239; relieved, 4,936; removed without having received material benefit, 3,190; eloped and discharged for misconduct, 1,145; pregnant women safely delivered, 1,013; infants born in the hospital and discharged in health, 955; died, 4,372. Total, 41,900.

Annual Homœopathic Convention.—The American Institute of Homœopathy held its second annual session in New York on the 14th and 15th ult. Jacob Jeanes, M.D., of Philadelphia, was elected President of the session, and Edward Bayard, M.D., of New York, General Secretary for the ensuing year. The following States were fully and ably represented: Maine, New Hampshire, Massachusetts, Rhode Island, New York, Pennsylvania, Delaware, Maryland, Virginia, and Ohio. The committee on the *Materia Medica*, Drs. Herring, Lingen, Jeanes, Neidhard and Williamson, of Philadelphia, made a highly interesting and important report upon certain American plants and other medicinal agents, whose properties were hitherto unknown. Several communications connected with the subject of Homœopathy were received from physicians who were unable to attend the meeting of the Institute. The papers being read, were ordered to be filed. The Institute unanimously resolved not to admit as a member any person who had not pursued a regular course of medical studies, according to the requirements of the existing medical institutions of our country, and in addition thereto, sustained an examination before the censors of the Institute, on theory and practice of homœopathy. The committee of publication were instructed to publish the first volume of the transactions of the Institute. Dr. Gray presented to the Institute three volumes on the subject of homœopathy published during the past year, including the first volume of Hahnemann's great work on chronic diseases, translated by Dr. Hempel.

After the discussion of various subjects interesting to homœopaths, the Institute adjourned to meet at Philadelphia on the second Monday of May next.

Sojourn of a Cherry Stone nine months in the Air Passages. By M. MASLIEURAT-LAGEMARD.—A woman, 54 years of age, without cause known to herself, was seized with fits of coughing, which came on every eight or nine days, and continued for several minutes. She had no feverish symptoms, nor pain of chest, nor unusual respiratory murmur. As the cough was always attended with sensation of suffocation, she asked medical advice; but as no cause could be detected to account for the cough, it was deemed nervous, and treated accordingly, but without affording any relief. Nine months after its appearance, during a fit of coughing, she expectorated a hard body, which, on examination, proved to be a cherry stone surrounded with a calcareous incrustation.—*Edinburgh Med. and Surg. Jour., from Gazette Medicale de Paris.*

Mortality of Amherst.—A statement has been published of the number of deaths in Amherst, in Hampshire county, Mass., during the year ending May 1. The whole number of deaths during that period was 54,

in a population of 2550, and what is remarkable is the great disparity between the deaths of males and females, viz. : 12 only of the former, and 42 of the latter. There were 15 deaths of consumption, and 11 of fever. The number of births was 76, and of marriages 19.

Medical Miscellany.—Accounts are brought of much sickness at Demerara.—The governor of Bermuda has recommended to the legislature of the Island to establish a lunatic asylum.—Dr. Payne, of Westminster, Carrol Co., Maryland, recently performed tracheotomy under peculiarly trying circumstances, by which a fine boy was saved from a speedy death.—Drs. McDowell and Sykes, of St. Louis, Mo., were both committed to jail, lately, for refusing to testify before the Grand Jury in relation to a duel, in which they were the reputed surgeons in waiting.—A German bled to death in forty-five minutes after having a tooth extracted, at Cincinnati, two weeks since.—No. VIII. of Dr. Copland's Dictionary of Practical Medicine, New York edition, is ready for subscribers.—Dr. Robert Young has been appointed clerk of the Navy Board at Norfolk.

ERRATUM.—Page 339, line 14 from bottom, the sentence should close with the word cure, instead of two lines below.

MARRIED.—At New York, Alex. B. Cleland, of Canada, to Miss F. K. Roberts.

DIED.—At New York, Dr. Charles E. Lock, 38, formerly of Boston.—James Barr, M.D., of Ipswich, Mass., 55.—In Windsor, Conn., Dr. Elisha N. Sill, 84.—At Barnstead, N. H., Dr. Noah J. T. George, 50.

Number of deaths in Boston, for the week ending June, 14, 47—Males, 29; Females, 18. Stillborn, 1. Of consumption, 3—typhus fever, 3—accidental, 3—palsy, 1—cancer, 1—suicide, 1—scarlet fever, 5—dropsy in the head, 3—inflammation of the brain, 3—inflammation of the bowels, 2—lung fever, 4—convulsions, 2—abscess, 1—inflammation of the lungs, 1—apoplexy, 2—old age, 2—pleurisy, 1—infantile, 1—disease of the brain, 1—unknown, 2.

Under 5 years, 15—between 5 and 20 years, 7—between 20 and 60 years, 22—over 60 years, 4.

REGISTER OF THE WEATHER.

Kept at the State Lunatic Hospital, Worcester, Mass. Lat. 42° 15' 49". Elevation 483 ft.

May.	Therm.	Barometer.	Wind.	May.	Therm.	Barometer.	Wind.
1	from 44 to 62	from 29.28 to 29.50	W	17	from 39 to 42	from 29.36 to 29.43	N E
2	54 59	29.19 29.30	N W	18	44 53	29.17 29.23	N E
3	40 70	29.40 29.46	S W	19	49 76	29.15 29.24	S W
4	52 77	29.30 29.40	S E	20	57 73	29.32 29.33	S W
5	55 59	29.25 29.38	N W	21	51 63	29.32 29.39	W
6	40 71	29.38 29.48	S W	22	46 67	29.39 29.45	S W
7	46 70	29.10 29.19	S W	23	47 65	29.23 29.30	W
8	36 51	29.20 29.40	N W	24	46 60	29.26 29.37	N W
9	34 54	29.47 29.61	N W	25	37 50	29.27 29.29	N W
10	34 63	29.76 29.84	N W	26	44 65	29.07 29.24	W
11	46 78	29.50 29.63	S W	27	46 78	29.25 29.25	S W
12	65 88	29.48 29.50	S W	28	53 76	29.32 29.39	S W
13	52 74	29.52 29.63	S E	29	50 61	29.39 29.27	W
14	55 78	29.19 29.44	S W	30	49 56	29.33 29.58	N W
15	51 75	29.04 29.68	S W	31	38 66	29.60 29.64	N W
16	40 43	29.24 29.44	N E				

This month has been pleasant, rather cold, the first half of it dry, and vegetation backward—the last, about an average for flowering and foliage. Severe frosts have been felt the last ten days, destroying some early garden plants. Range of Thermometer, from 34 to 88—Barometer, from 29.07 to 29.64. Rain, 3.33 inches. May 1st, Peach and Hyacinth in blossom. 3d, *Fyrus Japonica* in blossom. 4th, Shad bush in blossom. 5th, Wild Cherry in blossom. 8th, Apple in blossom—Frost. 10th, Frost. 20th, Thunder storm in the morning. 23, Mountain Ash in blossom. 24, Horse Chestnut in blossom. 25th, Frost—Snow squall. 28th, Rose Acacia in blossom. 30th, Frost.

Pathological Specimens.—A female, in the syphilitic wards of the Philadelphia Hospital, died rather suddenly, and her death could be traced to no certain cause. It became, therefore, an important inquiry to determine it. The lungs were found loaded with miliary tubercles, but there was no evidence during life of tuberculosis of the lung. Percussion—practised before the class—gave a duller sound than natural. It may seem strange that the presence of so many tubercles should have excited so little irritation during life, yet we know that such is not unfrequently the case. The lecturer has seen the lungs most extensively studded with calcareous deposits, where not the slightest evidence had existed during life of any pulmonary lesion. It is certain that in the present case the condition of the lungs could not account for death. The heart presented nothing abnormal.

Before death, blood, the amount of which could not be estimated, was passed from the rectum, and a still greater quantity was discharged afterwards.

The cavity of the rectum communicated by ulcerated openings—probably syphilitic—with that of the vagina.

The lecturer remarked, that there seemed to be no assignable cause for death, unless the amount of hemorrhage was sufficient to produce it, which scarcely seemed probable. It is possible, indeed, that the fatal event might have occurred from syncope, and that in the diseased condition of the patient, the heart was unable to resume its action. At times, mercurial erethism induces a fatal result, but, although she was affected with syphilis, no mercury had been administered.

He referred to a case that fell under his cognizance, in which death occurred from the simple application of the unguentum hydrargyri oxidi rubri to eczema rubrum of the leg. The patient, whilst sitting up in bed under mental emotion, became faint, fell back, and expired suddenly. The body was examined, and as no evident cause of death existed, it was presumed to have occurred from mercurial erethism. Many similar cases have been described by Mr. Pearson and others.—*Prof. Dunglison's Clinical Lecture, in Medical Examiner.*

Oxalic Acid in Rhubarb or Pie Plant.—A family of four persons, in this city, recently, after eating freely of the leaves of the domestic rhubarb or pie plant, boiled, and served as "greens," were, all of them, shortly seized with severe vomiting. In one of the persons it was followed by gastritis. The others recovered directly after the vomiting. We have occasionally seen notices in newspapers of this plant producing noxious effects. Will some of our chemical friends furnish us with a quantitative analysis of it, with reference especially to the proportion of oxalic acid which it contains?—*Buffalo Medical Journal.*

Statistics of Suicides in France in 1843.—In 1843, the number of suicides in all France was 3020, being 154 more than in 1842; the number of suicides in the Department of the Seine alone was 551.

Of the whole number, 729 were females, or 24 per cent.

There were under 16 years of age 15; octogenarians, 20; septuagenarians, 80; sexagenarians, 384.

The means of suicide were, drowning, 1098; hanging, 954; fire-arms, 450; fumes of charcoal, 206.